## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

4-4-05

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



or Fax

(703) 746-4000

appropriate. All further com	respondence including the I below or directed otherwise	Patent, advance or	ders and noti	fication of maintenance fe	es will be mailed to th	ne current	correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  27572 7590 01/28/2005				Fee(s) Transmittal	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
HARNESS, DICKEY & PIERCE, P.L.C. P.O. BOX 828 BLOOMFIELD HILLS, MI 48303				I hereby certify the States Postal Serv addressed to the	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.			
00 SUNAMMED 2005/30/4/	000069 10627041	RELEASE	. 47	transmitted to the	031 10 (703) 740-4000	o, on the d	(Depositor's name)	
)1 FC:1501	1400.00 OP	VC.	TRADE		<del>-</del>		(Signature)	
)2 FC:1504	300.00 BP						(Date)	
APPLICATION NO.	FILING DATE	1	FIRST NAMEI	INVENTOR	ATTORNEY DOCI	KET NO.	CONFIRMATION NO.	
10/627,041	07/25/2003		Fay M. S	Sommer	5898-0002	10	3729	
FITLE OF INVENTION: IN				PUBLICATION FEE	TOTAL PERIOD	DIE I	DATE DUE	
APPLN. TYPE	SMALL ENTITY	ISSUE FI			TOTAL FEE(S)	DUE		
nonprovisional	NO	\$1400		\$300	\$1700		04/28/2005	
EXAM	INER	ART UN	IT	CLASS-SUBCLASS				
SHAH, M	ANISH S	2853		347-100000				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).      Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.      "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
PLEASE NOTE: Unless recordation as set forth in	RESIDENCE DATA TO B an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will app Γa substitute	ear on the patent. If an as for filing an assignment.		low, the d	ocument has been filed for	
(A) NAME OF ASSIGNE	ee.	(B	) KESIDENC	E: (CITY and STATE OR	COUNTRY)			
FLINT INK CO				r, Michigan				
Please check the appropriate	assignee category or catego	ries (will not be pri	inted on the p	atent): 🗖 Individual 🖁	Corporation or other	private gro	oup entity Government	
la. The following fee(s) are	enclosed:	4b	. Payment of	• •		-		
Issue Fee				in the amount of the fee(s)				
	mall entity discount permitte	ed)		by credit card. Form PTO-				
Advance Order - # of	·		The Direction Deposit According	ctor is hereby authorized ount Number <u>08-07</u>	by charge the required 50 (enclose	fee(s), or an extra c	credit any overpayment, to opy of this form).	
	(from status indicated above		<b>□</b> 1. • •		MALI ENDIDE	C 27 O	CD 1.27(a)(2)	
The Director of the USPTO i	MALL ENTITY status. See is requested to apply the Issublication Fee (if required) words of the United States Pate	ie Fee and Publicat	tion Fee (if and	ant is no longer claiming S y) or to re-apply any previ- cother than the applicant; a				

April 1, 2005 Authorized Signature

ANNA M. BUDDE

Typed or printed name

35,085

Registration No.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

E THAD

TRANSMITTAL **FORM** 

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/627,041
Filing Date	July 25, 2003
First Named Inventor	Fay M. Sommer et al.
Art Unit	2853
Examiner Name	Manish S. Shah
Attorney Docket Number	5898-000210

ENCLOSURES (check all that apply)							
Fee Transmittal Form		☐ Drawing(s)		After Allowance Communication to Technology Center (TC)			
Fee Attached		Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences			
Amendment / Reply		Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)			
After Final		Petition to Convert to a Provisional Application		Pr	Proprietary Information		
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address		Status Letter			
Extension of Time Request		Terminal Disclaimer			Other Enclosure(s) (please identify below):		
Express Abandonment Request		Request for Refund  CD, Number of CD(s)		Check in the amount of \$1,700.00, Part B-Fee(s) Transmittal (in duplicate), and			
Information Disclosure Statement				Return Postcard			
Certified Copy of Priority Document(s)		Remarks  The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.					
Response to Missing Parts/ Incomplete Application							
Response to Missing Parts under 37 CFR 1.52 or 1.53							
	SIGNA	TURE OF APP	LICANT, ATTORNEY, OF	R AGE	NT		
Firm or Individual name	Harness, Dickey & Pierce, P.L.C.		Attorney Name Anna M. Budde		Reg. No. 35,085		
Signature	anna M Budde						
Date	April 1, 2005						
CERTIFICATE OF TRANSMISSION/MAILING							

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Anna M. Budde	Express Mail Label No.	EV 570 162 600 US (4/1/2005)
Signature	Juna 'M Budde	Date	April 1, 2005
<b></b>			

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.